## Wisconsin income tax For the year Jan. 1-Dec. 31, 2001, or Complete form using BLACK INK other tax year beginning 2001 ending First name and middle initial Your last name You must fill in your social security numbe label or print If a joint return, spouse's last name First name and middle initial You must fill in spouse's social security number Home address (number and street) City or post office State Zip code If you want \$1 to go to the State Election Campaign Fund, check ✓ box(es). Filing status Check ✓ only one box Checking the box(es) will not change your You Your spouse tax or refund. Single Check ✓ proper box and fill in name of city, village, or town, Married filing joint return and the county in which you lived at the end of 2001. City Married filing separate return. Fill in spouse's full name and social security number ▼ Village Town County of Head of household (see page 6) School district Fill in your school district number (see page 38) State and municipal interest (see page 7) . . Capital gain/loss addition (see page 8)...... Other additions (list) State tax refund (Form 1040, line 10) . . . . . . 7 United States government interest . . . . . . 7 8 Unemployment compensation (see page 9) . . 8 Social security adjustment (see page 9) . . . . 9

11

**13** Subtract line 12 from line 5. This is your Wisconsin income......

Capital gain/loss subtraction (see page 10) . . 10

Other subtractions (list)

PAPER CLIP check or money order here

See page 27 before assembling return



Form 1 (2001) Page 2 of 4 **14** Wisconsin income from line 13......**14** If someone else can claim you as a dependent, see page 17 and check box ▶ **16** Subtract line 15 from line 14. If line 15 is larger than line 14, fill in 0 . . . . . . . . **16** 17 Deduction for exemptions (from line 6 of Exemption Worksheet on page 17) . . . . 17a **b** Fill in number of dependents (do not count yourself or your spouse) . . . **\rightarrow** c If you (or your spouse if filing joint) were age 65 or over, You Spouse 18 Subtract line 17a from line 16. If line 17a is larger than line 16, fill in 0. 20 Itemized deduction credit. 21 Armed forces member credit \( \) (must be stationed out- side U.S. See page 18) 22 School property tax credit a Rent paid in 2001-heat included Find credit from table page 19 .... 22a Rent paid in 2001-heat not included Find credit from table page 20 .... **22b b** Property taxes paid on home in 2001 23 Working families tax credit } If line 13 is less than \$10,000 (\$19,000 if married filing joint), see page 20 ..... 23 25 Subtract line 24 from line 19. If line 24 is larger than line 19, fill in 0 . . . . . . . . 25 28 Married couple credit. Attach Schedule 2, page 4. 28 29 Manufacturer's sales tax credit. Attach Schedule MS . 29 31 Subtract line 30 from line 27. If line 30 is larger than line 27, fill in 0. 33 Packers football stadium donation (decreases refund or increases amount owed) 33 35 Endangered resources donation (decreases refund or increases amount owed) \_\_\_\_ 35 **36** Penalties on IRAs, other retirement x .33 = . . . . . . 36 plans, MSAs, etc. (see page 22)... 

N e w



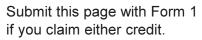
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lame(s) shown on Form 1		Your social security number
8 Amount from line 37	38	
9 Wisconsin tax withheld. Attach withholding statements		
2001 estimated tax payments and amount applied from 2000 return		
Earned income credit. Qualifying children . ►  Federal  credit % = 41		
2 Farmland preservation credit. Attach Schedule FC . 42		
Net income tax paid to another state (see page 24) . 43		
4 Homestead credit. Attach Schedule H		
Farmland tax relief credit.  Property taxes on farmland		
Add lines 39 through 45	46	
If line 46 is larger than line 38, subtract line 38 from line 46.  This is the <b>AMOUNT YOU OVERPAID</b>	47	
Amount of line 47 you want <b>REFUNDED TO YOU</b>	48	
Amount of line 47 you want  APPLIED TO YOUR 2002 ESTIMATED TAX 49		
If line 46 is smaller than line 38, subtract line 46 from line 38. This is the <b>AMOUNT YOU OWE</b> . Paper clip payment to front of return	50	
Underpayment interest. Also include on line 50 <b>51</b>		
<ul> <li>Attach copies of your federal income tax return and schedule</li> <li>Assemble your return (pages 1-4) and withholding statement</li> </ul>		r listed on page 27.
ign here		
Under penalties of law, I declare that this return and all attachments are true, correct, and complete	to the best of my	knowledge and belief.

Your signature Spouse's signature (if filing jointly, BOTH must sign) Date Daytime phone

Mail your return to:	Wisconsin Department of Revenue
If tax due	PO Box 268, Madison WI 53790-0001
If refund or no tax due	PO Box 59, Madison WI 53785-0001
If homestead credit claimed	PO Box 34, Madison WI 53786-0001

For Department Use Only													
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S	chedule 1 – Itemized Deduction Credi	it (see page 17)		
1	Medical and dental expenses from line 4, federal for exceptions		1	
2	Interest paid from line 14, federal Schedule A. I second home located outside Wisconsin or on do not include interest paid to purchase or hold	2		
3	Gifts to charity from line 18, federal Schedule A	. See instructions for exceptions	3	
4	Add lines 1 through 3		4	
5	Fill in your standard deduction from line 15 on p	page 2	5	
6	Subtract line 5 from line 4. If line 5 is more than	line 4, fill in 0	6	
7	Rate of credit is .05 (5%)		7	x .05
8	Multiply line 6 by line 7. Fill in here and on line 2	20 on page 2	8	
	chedule 2 – Married Couple Credit Winen completing this schedule, be sure to fill in yo			•
1	Taxable wages, salaries, tips, and other employee compensation. Do NOT include deferred compensation, interest, dividends, pensions, unemployment compensation, or other unearned income			
2	Net profit or loss from self-employment from federal Schedules C, C-EZ, and F (Form 1040), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income (If a loss, put a negative sign – in the box to the left of the loss amount.)	_		
3	Combine lines 1 and 2. This is earned income			
4	Add amounts from your federal Form 1040, lines 23 and 29, plus repayment of supplemental unemployment benefits, employee expenses of qualified performing artists and fee-basis state or local government officials, and contributions to secs. 403(b) and 501(c)(18) pension plans included in line 32, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to your or your spouse's income 4			
5	Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0 5			
6	Compare the amounts in columns (A) and (B) of the smaller amount here. If more than \$16,000			
7	Rate of credit is .03 (3%)	7	x .03	
8	Multiply line 6 by line 7. Fill in here and on line 2	28 on page 2 <b>8</b>		Do not fill in more than \$480.